

STATE PLAN UNDER TITLE XIX OF SOCIAL SECURITY ACT  
STATE/TERRITORY: GEORGIA  
CASE MANAGEMENT SERVICES

A. Target Group

All Medicaid eligible recipients age 18 and over who meet one of the following conditions are eligible for services in the Adult Protective Services Case Management Program:

- 1.) Recipients must be at imminent risk of or experiencing abuse, neglect or exploitation due to their inability to protect themselves or their caretaker's willful or otherwise failure to meet their basic needs for physical or emotional care and protection; or
- 2.) Recipients must be at significant or imminent risk of institutionalization due to their inability or their caretaker's inability to provide the minimum sufficient level of care in their own home; or
- 3.) Recipients must be wards of Directors of County Departments of Family and Children Services because they have been adjudicated by Probate Court as being in need of a guardian of person.

B. Areas of the State in which services will be provided:

☒ Entire State

☐ Only in the following geographic areas (authority of §1915(g)(1) of the Act is invoked to provide services less than statewide):

C. Comparability of Services:

x Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(2) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Case Management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible recipients. The purpose of case management services is to assist the targeted population in gaining access to needed medical, nutritional, social, educational, transportation, housing and other service; and to encourage the use of various community resources through referral to appropriate providers.

TRANSMITTAL 93041  
APPROVED 8/24/94  
EFFECTIVE 7/01/93  
SUPERSEDES N2W

Case Management is performed through a set of interrelated activities which include the following:

1. Establishing the comprehensive case file including development and implementation of an individualized service plan to meet the assessed service needs of the client;
2. Assisting the client in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan;
3. Monitoring the client and service provider to determine that the services received are adequate in meeting the client's needs; or
4. Reassessment of the client to determine services needed to resolve any crisis situation resulting from neglect, maltreatment, exploitation, divorce, death, separation, changes in family structure or living conditions, or other events.

**E. Qualifications of Providers:**

All providers must:

1. Comply with the mandates of 42 CFR 431.300 subpart (F) regarding confidentiality.
2. Demonstrate the capacity to provide all core elements of case management services.
3. Provide accurate documentation of costs and agree to participate in an annual cost study to determine reimbursement rates for services;
4. Develop a billing system to appropriately identify and bill all liable third parties;
5. Document and maintain case records in accordance with state and federal requirements;
6. All providers must complete a practicum designed and supervised by the Department of Family and Children Services.

TRANSMITTAL 93-041  
APPROVED 8/24/94  
EFFECTIVE 7/01/93  
SUPERSEDES NEW

E. Qualifications of Providers: (Continued)

7. Maintain such records as are necessary to fully disclose the extent of services provided and to furnish the Department with information as it may periodically request. All service records, which must be maintained for three (3) years after the delivery of service, must meet the requirements in Section 4302 of the State Medicaid manual.
8. Be skilled in the process of coordinating services for a wide range of disabled adults' needs;
9. Be knowledgeable about local community resources and how to use those resources for the benefit of the client;
10. Be graduates of a college or university with an undergraduate degree in Psychology, Sociology, Social Work or a related field, or have one year of experience providing counseling, guidance services, referral services, or public assistance; and
11. Be knowledgeable about the state's standards and policies related to community services for recipients who are wards of Directors of County Departments of Family and Children Services.

TRANSMITTAL 93-041  
APPROVED 8/24/94  
EFFECTIVE 7/01/93  
SUPERSEDES *NW*

- F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.
1. Eligible recipients will have free choice of the providers of case management services.
  2. Eligible recipients will have free choice of the providers of other medical care under the plan.
- G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same service.

TRANSMITTAL 93-041  
APPROVED 8/24/94  
EFFECTIVE 7/01/93  
SUPERSEDES NEW

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State/Territory: Georgia  
CHILDREN AT-RISK CASE MANAGEMENT SERVICES

A. Target Group:

Children aged 0-21, who are at risk of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen indicates the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening.
3. Free or reduced price lunch.
4. One or more retentions.
5. Iowa Test of Basic Skills (ITBS)/Test of Achievement and Proficiency (TAP) reading scores below the 35th percentile and not receiving special education services.
6. Five or more unexcused absences in any one twenty (20) day attendance period.
7. Two or more suspensions during the most recent school year.
8. Limited English proficiency.
9. Transferred two or more times during the most recent school year.
10. One or more years below grade placement in the reading basal.
11. Few friends or school alienation.
12. Little or no extracurricular involvement.
13. Children or children with family members identified as drug and/or alcohol abusers.
14. Inadequate health care.
15. Teenaged mother or parents.
16. Frequent disciplinary referrals.
17. Dysfunctional home situation.
18. Disabled without mental impairment.
19. Inadequate utilities and household appliances.
20. Family members with limited job skills and difficulty finding employment.
21. Pregnancy.

B. Areas of State in which services will be provided:

☐ Entire State

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide): Muscogee County

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TN No. 96-023  
Supersedes  
TN No. 93-046

Approval Date

1/13/97

Effective Date

9/1/96

C. Comparability of Services

- [ ] Services are provided in accordance with Section 1902(a)(10)(B) of the Act.
- [X] Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children. The purpose of case management services is to assist those targeted at-risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing and other services; and to encourage the use of various community resources through referral to appropriate providers. Case Management services will provide necessary coordinations with providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible recipient. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each recipient.
2. Assistance to the eligible recipient in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and follow-up with eligible recipients and service providers to determine that the services received are adequate in meeting the recipient's assessed needs. Case management follow-up services are limited to 12 units annually.
4. Reassessment of eligible recipients to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

TRANSMITTAL 93-046  
APPROVED 1-28-94  
EFFECTIVE 10-1-93  
SUPERSEDES NEW

E. Qualification of Providers:

1. Provider Qualifications

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet the following requirements:

- a. Must have the capacity to provide the full range of at-risk case management services.
- b. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
- c. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, Social Services, Counseling Services, Psychological Services, Student Assistance, and Nutritional Services).
- d. Must have demonstrated the ability to obtain collaboration between public and private service providers.
- e. In order to avoid duplication of services and to promote effective community level networking, case management providers must have a signed collaborative agreement with the Muscogee County Health Department, Muscogee County Department of Family and Children Services, Muscogee County Juvenile Court, Muscogee County School District, the Housing Authority of Columbus, Columbus Parks and Recreation, Columbus Consolidated Government, Coalition for Children and Youth, and the E. E. Farley Homes Resident Council.
- f. Case Managers must hold a high school diploma or equivalent and have extensive experience working with low income indigenous children and their families.
- g. The case management supervisor(s) and case managers must complete a preservice training program and a Family Connection designed and supervised practicum experience.

F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violations of Section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. Reimbursement methodology is found in Attachment 4.19-B, pages 5d and 5e.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Georgia

CASE MANAGEMENT SERVICES

**A. Target Group:**

Children 0 - 21 and their Medicaid eligible siblings who are "at risk" of not completing a secondary education program because they exhibit three or more of the following characteristics:

1. Developmental screen (such as Denver, Vineland Adaptive Behavior Scale, Carolina Developmental Scale, First Step) indicates that the child is not meeting developmental milestones.
2. No EPSDT initial screen or no periodic screening or inadequate health care.
3. Free or reduced price lunch.
4. One or more retentions.
5. Children with Iowa Test of Basic Skills (ITBS)/Test of Achievement and Proficiency (TAP) reading scores below the 50th percentile and not receiving special education services.
6. Frequent absences, tardiness or school transfers. .
7. Two or more suspensions during the most recent school year or frequent disciplinary referrals.
8. Has been referred to the Student Support Team.
9. Single parent family.
10. School alienation or few friends or little or no extracurricular involvement.
11. Residing in home situation with guardian or caretaker other than natural parent(s).
12. Born to a teen mother.
13. Low self-esteem or expresses feelings of lack of control.
14. History of exposure to direct or indirect violence.
15. History of sexual or physical abuse or neglect.
16. Lack of appropriate physical necessities (clothing, personal hygiene, etc.)

**B. Areas of State in which services will be provided:**

☐ Entire State

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than statewide): DeKalb County

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TN No. 99-007

Supersedes

TN No. 96-005

Approved Date

7/20/00

Effective Date

7/20/00



C. Comparability of Services:

- [ ] Services are provided in accordance with Section 1902(a)(10)(B) of the Act.
- [X] Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Children at-risk case management is a set of interrelated activities for identifying, coordinating, and reviewing the delivery of appropriate services for eligible at-risk children.

The purpose of case management services is to assist those targeted at risk children in gaining access to needed medical, nutritional, social, educational, transportation, housing and other services; and to encourage the use of various community resources through referral to appropriate providers.

Case Management services will provide necessary coordination with providers of health, family support, employment, justice, housing, counseling, nutrition, social, educational, transportation, and other services when needed.

The set of interrelated activities are as follows:

1. Establishing the comprehensive case file for development and implementation of an individualized service plan to meet the assessed service needs of the eligible child. Establishing priorities for initial linkages with providers. This unit of service may be billed only once for each eligible child.
2. Assistance to the eligible child in locating needed service providers and making the necessary linkages to assure the receipt of services identified in the service plan.
3. Monitoring and following-up with eligible child and service providers to determine that the services received are adequate in meeting the child's assessed needs. Case management follow-up services are limited to 12 units annually.
4. Reassessment of eligible children to determine the services needed to resolve any crisis situation resulting from divorce, death, separation, family structure changes, changes in living conditions, or other events.

TRANSMITTAL 94-001  
APPROVED 3-11-94  
EFFECTIVE 1-1-94  
SUPERSEDES (NEW)

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E. **Qualification of Providers:**

Enrollment will be accomplished in accordance with Section 1902(a)(23) of the Act. Enrollment is open to all providers who can meet the following requirements:

1. Must have the capacity to provide the full range of at-risk case management services.
2. Must meet the applicable state and federal laws governing the participation of providers in the Medicaid program.
3. Must have demonstrated direct experience in the coordination of educational support services (e.g., EPSDT, social services, counseling services, psychological services, student assistance, special education, and nutritional services).
4. Must have demonstrated the ability to obtain collaboration between public and private service providers.
5. In order to avoid duplication of services and to promote effective community level networking, case management providers must have a signed collaborative agreement with the DeKalb County Board of Health, DeKalb County Department of Family and Children Services, DeKalb County Juvenile Court, Georgia Department of Children and Youth Services, City of Decatur, City Schools of Decatur, and Community Service Board.
6. Case management supervisors must hold a Bachelor's Degree in a human services field; i.e., psychology, sociology, social work, humanities, counseling, career services; and have two years of supervisory experience working with at-risk children and their families.
7. Case managers must have two (2) years of college and have two (2) years experience working with at-risk children and their families.
8. Both the case management supervisor(s) and the case managers must complete a pre-service training program and a Family Connection designed and supervised practicum experience.

F. The state assures that the provision of case management services will not restrict an individual's free choice of providers in violation of Section 1902(a)(23) of the Act.

1. Eligible recipients will have free choice of the providers of case management services.
2. Eligible recipients will have free choice of the providers of other medical care under the plan.

G. Payment for case management services under the plan does not duplicate payments made to public agencies or private entities under other program authorities for this same purpose. Reimbursement methodology is found in Attachment 4.19-B, pages 5d and 5e.

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TN No. 96-005  
Supersedes  
TN No. 94-001

Approved Date 4-17-96 Effective Date 1-1-96